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ABSTRACT

In an effort to compare the socialization of Latino and White children with regard to health, a study was undertaken of 94 Latino and White mothers, 75 Latino and White fathers, and their fourth-grade children attending Catholic schools in a mid-sized west coast city. A questionnaire was administered to the children, assessing their locus of control with respect to health, general locus of control, obedience to authority, and perceptions of their own health. Similarly, parents completed a questionnaire regarding their locus of control for their own health and for their child's health, general locus of control, obedience to authority, and perception of their child's health. Findings indicated relationships between the control attitudes of parents and children and differential patterns of relationships between Latino and White families. Specifically, unique characteristics of Latino family health attitudes included less use of pediatric preventive services, lower expectations for child health, and greater dissatisfaction with delivery systems. Latino family dynamics affecting health included an emphasis on family privacy and a tendency to solve problems within the family. These findings confirm the importance of taking ethnicity into account in health education efforts. Tables showing Latino characteristics and correlations between both groups for locus of control, health perceptions, and attitudes toward authority are included. (BCY)

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Latino Familial Childhood Health Socialization: Theoretical and Applied Issues

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Abstract

This project is a comparative study of health-specific and general attitudes affecting childhood health socialization in Latino and Anglo families. Father, mothers, and their fourth-grade children completed questionnaires assessing health locus of control, general locus of control, obedience to authority, and perception of child health status. Findings indicate differential patterns of relationships between parent and child attitudes across Latino and Anglo families. The importance of these data for theories of child health socialization and health prevention/intervention programs in families of different ethnic backgrounds is underscored.

Introduction

Childhood morbidity remains disproportionately high in children from minority families in the U.S. Latino children, in particular, seem to be at unprecedented risk for poor health.

A variety of indicators distinguish the health attitudes of Latino families with young children from similar non-Latino families (see Table 1). Several unique characteristics of Latino family dynamics also affect parental attitudes and behavior on behalf of their children's health (see Table 2).

During the early years of life, health-specific and general family socialization sets the stage for later childhood and adult health attitudes and behavior, with consequences for health status.

The present study examines a virtually unexplored topic in Latino families, childhood health socialization in the context of the family.

Methods

Sample

Predominantly middle-class Latino and Anglo mothers (94), fathers (75), and their fourth-grade children attending Catholic

schools in a mid-size west coast city were subjects in this study. Approximately equal numbers of male and female children participated, and all children were in good health.

Procedure

Children completed questionnaires in their classrooms which assessed their: (1) health locus of control, (2) general locus of control, (3) obedience to authority, and 4) perception of health status. Parents completed questionnaires at home, delivered by their children and returned by mail which assessed their: (1) health locus of control concerning their own health, (2)health locus of control with respect to their child's health, (3) general locus of control, (4) obedience to authority, and (5) perception of their child's health status (see Table 3).

Results

Results indicate a pattern of similarities and differences comparing parent and child health and general attitudinal variables for Latino and Anglo families (see Tables 4, 5 and 6).

Discussion

These results indicate relationships between the control attitudes of parents and children, which suggests a pattern of intergenerational transmission of health-related control beliefs in both Latino and Anglo families. However, it is interesting that fathers' attitudes are more highly related to children's control attitudes and perceptions of health in Latino than in Anglo families, which may be in part due to the salience of fathers for these issues in Latino families.

Theoretically, these data contribute to emerging models of childhood health socialization in the context of the family. These findings confirm the importance of specifying ethnicity in the determination of patterns of intergenerational consistency of

both health-specific and more general attitudes which affect health behavior and health outcome.

Within an applied perspective, these findings suggest differential potential health education and intervention target areas for modifying parental health socialization of children in Latino and Anglo families.

Table 1

Unique Characteristics of Latino
Health Attitudes

* lower rates of utilization of pediatric preventive health services
* lower expectations for child health status
* greater dissatisfaction with health care service delivery systems

Table 2

Unique Characteristics of Latino Family
Dynamics Impacting on Latino Child Health

* beliefs in the importance of family privacy
* tendency to look for solutions to problems within the family rather than from outside institutions
* respect for authority of senior family members (who may hold more traditional folk beliefs concerning wellness and illness that may preclude reliance on institutional medical help)

Table 3

Children's Health Locus of Control (Parcel & Meyer)
Example: I can do many things to fight illness.

Parental Health Locus of Control (Tinsley & Holtgrave)
Example: I can only do what the doctor tells me to do for my child.

Perception of Health Status (Parent and Child)
Example: I seem to get sick a little easier than other people...

Parental Perception of Child's Health Status
Example: Your child is somewhat ill...

General Locus of Control (Parent and Child)
(Nowicki-Strickland Internal-External Control Scale)
Example: Do you believe that when bad things are going to happen, they just are going to happen no matter what you try to do to stop them?

Obedience to Authority (Parent and Child) (modified from Attitude Toward Authority Scale)
Example: Obedience is the source of success.

Table 4

Correlations Between Parent and Child Health Attitudes (Locus of Control)

Locus of Control Attitudes	Latino	Anglo
Children's Powerful Others Health Locus of Control Mothers' Powerful Others Health Locus of Control (self)		.28**
Children's Powerful Others Health Locus of Control Mothers' Powerful Others Health Locus of Control (for child)	.42*	.26**
Children's Powerful Others Health Locus of Control Fathers' Powerful Other Health Locus of Control (self)	.45**	
Children's Chance Health Locus of Control Mothers' Chance Health Locus of Control (for child)		.24**
Children's Internality Health Locus of Control Fathers' Internality Health Locus of Control (self)	-.37	
Children's Locus of Control Mothers' Locus of Control		.30***

*** p<.01
** p<.05
* p<.10

Table 5

Correlations Between Parent and Child Health Perceptions

Health Perception	Latino	Anglo
Children's Health Perception Mothers' Perception of Child Health	-.31	.24**
Children's Health Perception Fathers' Perception of Child Health	.31	
Children's Health Perception Mothers' Perception of Own Health	.38*	
Children's Health Perception Fathers' Perception of Own Health	.32	

Table 6

Correlation Between Parent and Child Attitudes Towards Authority

Authority Attitudes	Latino	Anglo
Children's Obedience to Authority Fathers' Obedience to Authority	.33	.29**

*** p<.01
** p<.05
* p<.10